The First International Congress of
Regional Anesthesia and Pain Interventions
and 3rd Annual Congress of ISRAPM
درد ایی‌تریوشی‌ال ی آوستزی وآل رژی المللی بیه کی‌گر ایلیه
ایران درد ی آوستزی وآل رژی اوجمه سالیاو کی‌گر مّیه س ی

P1-0147

EVALUATION OF ADDING ACETAMINOPHEN ON FENTANYL IN PATIENT-CONTROLLED IV ANALGESIA (PCIA) AFTER ORTHOPEDIC SURGERY

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Adequate postoperative analgesia is one of the most concerns of anesthesiologists. Systemic opioids administration is the gold standard in reducing the severe pain after surgery but some side effects such as nausea and vomiting, itching, urinary retention, respiratory depression, and so on, prevent the use of adequate doses of opioids. Addition of other drugs to opioids has been considered, for reducing the doses of opioids. Acetaminophen is one of the non-opioids intravenous analgesics and antipyretic whivh used for mild to moderate pain. The aim of this study was evaluatuion of adding acetaminophen to morphine in patient-controlled iv analgesia (PCIA).

Methods:

Sixty patients, 18-65 years, ASA I - II candidated for orthopedic surgery were enrolled in the study. For postoperative analgesia, patient-controlled iv analgesia (PCIA) pump was used for all patients, and PCIA pumps were adjusted to 5ml/h. Patients divided in to F (fentanyl) and AF (acetaminophen and fentanyl) groups. Each ml of analgesic solution in F group contained 10 mcg fentanyl, and in group AF contained 5 mcg and 20 mg acetaminophen. Pain score (VAS and VRS), sedation score (Ramsy scale), nausea and vomiting. the amount of fentanyl consumption during 6, 12, 24, 36 and 48h after operation were recorded.

Results:

Data reveals demographic findings are similar in both groups. The group AF has lower pain scores in all studied hours. Patient satisfaction is significantly greater in AF group and side effects are more frequent in F group.

Conclusion:

This study assesses the benefits of combining two analgesics for the control of post operative pain, such a combination improves the quality of pain relief and patient satisfaction. The study indicates the need of furthur surveys on different doses of acetaminophen with other opioids in various surgeries.

Keywords: Acetaminophen, fentanyl, orthopedic surgery